Attorney Docket No.: 06275-0492US1 / 101170-1P US

## IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant: Ambrose et al. Art Unit: 1637

Serial No.: 10/566,054 Examiner: Teresa E. Strzelecka

Filed: June 27, 2006 Confirmation No.: 8283

Notice of Allowance Date: November 19, 2009
Title : USE OF POLYMORPHISMS IN HUMAN OATP-C ASSOCIATED WITH AN

EFFECT ON STATIN PHARMACOKINETICS IN HUMANS IN STATIN

THERAPY

## MAIL STOP ISSUE FEE

Commissioner for Patents

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## RESPONSE TO NOTICE OF ALLOWANCE

In response to the Notice of Allowance mailed November 19, 2009, enclosed are a completed issue fee transmittal form PTOL-85b and payment in the amount of \$1810 for the required issue fee and publication fee.

Please apply any additional charges or credits to our Deposit Account No. 06-1050.

Respectfully submitted,

Date: February 9, 2010 /Cameron M. Luitjens/

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## PART B - FEE(S) TRANSMITTAL

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26164 7590 11/19/2009

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APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR			ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/566,054	06/27/2006	Helen Jean Ambrose		06275-0492US1	8283	
$ \label{thm:condition} ITILE OF ENVENTION: USE OF FOLYMORPHISMS IN HUMAN OATP-C ASSOCIATED WITH AN EFFECT ON STATIN PHARMACOKINETICS IN HUMANS IN STATIN THERAPY \\$						
APPLN, TYPE	SMALL ENTITY	ISSUE FEE		PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1510		\$300	S1810	02/19/2010
EXAMINER		ART UNIT		CLASS-SUBCLASS	1	
STRZELECKA, TERESA E.		1637		435-006000	•	
Change of correspondence address or indication of "Tee Address" (27 CFR 1.363).  [ ] Change of correspondence address (or Change of Correspondence Address form PTO/SB 1/22) attached.  [ ] "Tee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 09-09 or more recent) attached. Use of a Customer Number is required.			2. For prising on the potent foot page, list (1) the names of up to 3 registered patent almoneys or a spents OR, allematively, (2) the name of a single frum (having as a member a registered atomety or agent) and the names of up to 2 registered patent atomeys or agents. If no name is listed, no name will be printed.			
3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type) PLEASE NOTE clustes an assigne is identified below, no assignee data ull appear on the patient. Inclusion of assignee data is only appropriate when an assignment has been previously submitted to the USPTO or is being submitted under separate cover. Completion of this form is NOT a substitute for filing an assignment.  (A) NAME OF ASSIGNEE  ANTAZENCE AS  Sodertalle. Sweden  Sodertalle. Sweden						
Please check the appropriate assignee category or categories (will not be printed on the patent): [   individual [X] comporation or other private group entity [ ] government						
4a. The following fee(s) are enclosed:  [X] Issue Fee [X] Publication Fee (No small entity discount permitted)  [ ] Advance Order - # of Copies			4b. Psyment of Fec(s):  [] A check in the amount of the fec(s) is enclosed. [] Psyment by credit card. Form PTO-2038 is stateded. [X] The Director is breely authorized to change the required fec(s), or credit any overpayment, to Deposit Account Number 06-1003 (enclose an extra copy of this form).			
5. Change In Entity Status (from status indicated above)  [] a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27. [] b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).						
The Director of the USPTO is requested to apply the Issue Fee and Publication Fee (if any) or to re-apply any previously paid issue fee to the application identified above.  NOTE: The issue Fee and Publication Fee (if required) will not be accepted from anyone other than the applicant, a registered agent or, or the assignee or other party in interest as shown by the records of the Lintied States Patent and Tendamak Office.						
(Authorized Signature) /Cameron M. Luitiens/				(Date) February 9, 2010		
Typed or Printed Name Cameron M. Luitjens, Ph.D., J.D.				Registration No58,674		

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This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) rms concessors on mormation is required by 3 f. U.S. I. 2 and 3 G.R. II. This collection is estimated to be than or retain a benefit by the public which is to file (and by the USPIO to process) an application. Confidentiality is governed by 35 U.S. C. 2 and 37 G.R. I.I. A. This collection is estimated to take I.2 minusts to complete, interest of a submitting the completed application form to the USPIO. Time will vary depending upon the individual case. Any comments on the amount of time your require to complete this form and/or suggestions for reducing this bounds, should be sent to the Chief Information Officer, U.S. Deptical and Transferent Office, U.S. Deptiment of Commerce, P.O. Box 1450, Alexandria, Vingnia 2231-4450, DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Vingnia 2231-4450. Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.